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APPLICANTS

Jacob Bradley Schwarz, Ann Arbor, MI;  
 David Juergen Wustrow, Ann Arbor, MI;

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/441,825 01/22/2003 *Ref*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none Ref*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 04/21/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MI	SHEETS DRAWING 0	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 1
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Verified and Acknowledged  
 Examiner's Signature *[Signature]* Initials *[Initials]*

ADDRESS  
 28880  
 WARNER-LAMBERT COMPANY  
 2800 PLYMOUTH RD  
 ANN ARBOR , MI  
 48105

TITLE  
 Cyclopropyl beta-amino acid derivatives

FILING FEE  RECEIVED 806	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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